

Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

## MAY 2 9 1997

Mr. Terance Grisso Director of Regulatory Affairs and Quality 511 Lobo Lane P.O. Box 9 Little Elm, Texas 75068-0009

Re: K970803

Trade Name: Vanish Point™ Syringe

Regulatory Class: II Product Code: MEG

Dated: February 14, 1997 Received: March 4, 1997

Dear Mr. Grisso:

We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the Good Manufacturing Practice for Medical Devices: General (GMP) regulation (21 CFR Part 820) and that, through periodic GMP inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please note: this response to your premarket notification submission does not affect any obligation you might have under sections 531 through 542 of

the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market. If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4692. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its internet address "http://www.fda.gov/cdrh/dsmamain.html".

Sincerely yours

Timothy A. Ulatowski

Direct or

Division of Dental, Infection Control, and General Hospital Devices Office of Device Evaluation Center for Devices and

Radiological Health

Enclosure

## **Indications For Use**

510(K) Number (if known): K9	770803	
Device Name: VanishPoint™ Syri	nge	·
Indications for use:  The function of the VanishPoint™ Syringe is to provide a safe and reliable method of injecting medication into a patient or withdrawing blood from a patient. The VanishPoint™ Syringe works like a conventional hypodermic syringe except for its ability to retract the contaminated needle inside of the syringe immediately after patient injection. Needle retraction is activated the syringe user. Because the contaminated needle is automatically withdrawn into the syring barrel, the syringe user is protected from accidental needlesticks. These accidental needlestick would occur between removing the needle from the patient and disposing of the syringe in a sharps disposable container.		
(PLEASE DO NOT WRITE BELOW THI	IS LINE - CON	TINUE ON ANOTHER PAGE IF NEEDE
Concurrence of CDR	tH, Office of D	evice Evaluation (ODE)
(Division Sign-Off) (Division of Dental, Infection Control, and General Hospital Devices	Tucente	i i
(Division Sign-Off) Autocax C Division of Dental, Infection Control, and General Hospital Devices 510(k) Number <u>K920803</u>	Toccenti	i i
and General Hospital Devices	OR	Over-The-Counter Use